MADISON COUNTY JUNK VEHICLE PROGRAM

PO Box 278, Virginia City, MT 59755 ~Phone: (406) 843-4275 Fax: (406) 843-5362

RELEASE OF OWNERSHIP OR INTEREST IN MOTOR VEHICLE

YEAR of VEHICLE:	COLOR: LIC. PLATE#:	STATE:
MAKE:	YEAR of PLATES:_	STATE:
VEHICLE PARTS I CIRCLE ALL TH		
MOTOR FRAMEDIFFERENTIAL	TRANSMISSION	BODY
VEHICLE LO This vehicle is located a		
READ THIS BEFORE SIGNING AND RETURN The undersigned, being the legal owner of or having a legal interest in agent of the Junk Vehicle Program to remove this vehicle to an approforegoing removal, I hereby release all rights, title and interest in the vectompensation. If the owner or possessor of the above mentioned vehicle the vehicle be disposed of only through crushing or recycling and that the	n the vehicle described about the county motor vehicle good being to the State of Montaile being released to the court	ve, hereby authorizes duly appointed raveyard. In the consideration of the na and it's agents without payment of nty junk vehicle program requests that
OWNER OR POSSESSOR OF AB	OVE MENTIONED V	EHICLE:
CIRCLE CHOICE: CRUSED/RECYLED OR NO PRE	FERENCE	
I agree to hold the State of Montana, Madison County and its ager foregoing release and removal of this vehicle. I understand upon Vehicle Program, there is NO TOWING CHARGE .		
NAME of REPONSIBLE PARTY:		PHONE:
ADDRESS:	DATE of RELEASE:	
SIGNED:	WITNESS:	
FOR DRIVER ONLY: DATE of PICK UP and DELIVERY to ALDER JUNK VEHICLE YA		
PLEASE CIRCLE YES OR NO TO ALL THAT APPLY:		
1. ALL FLUIDS HAVE BEEN REMOVED AND PROPERLY DISPOSE		YES NO
(gas, motor oil, transmission fluid, transfer case fluid, antifre 2. AIR CONDITIONING UNIT IN THE VEHICLE.	eze.)	YES NO
3. I HAVE REMOVED ALL PERSONAL BELONGINGS AND TRASH.4. I HAVE ATTACHED THE VEHICLE TITLE.		YES NO YES NO